PTOISBOS (\$3-03)
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U.S. Paters and Trademark Office: U.S. DEPARTMENT OF COMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Acolication of Doctor Mumber 10 710 307		
CLAIMS AS FILED - PART I (Column 1) (Column 2)						ENTITY	QR	OTHE	R THAN . ENTITY
		BER FILED . MANE		ER EXTRA	RATE	FEE		RATE	· FEE
BASIC FEE CIT OFR 1.16(12)			•	•		5	OR		3
TOTAL CLAIMS (37 CFR 1,16(cl)		minus 20 +		•	K 1 *		OR	x's:e	
DIDEPENDENT CLAMS (37 OFR 1.15(b))		minus 3	•		× \$•		OR	E 5 =	
MALTIPLE DEPENDENT CLAM PRESENT . (27 CFR 1.14(4))					* \$*		OR	+5	
* If the difference in column 1 is less than zero, enter "0" in column 2.					TOTAL		OA	TOTAL	
CLAIMS AS AMENDED - PART II									
_	(Column 1)		(Caluma 2)	(Column 3)	SMALL	ENTITY	CR	-	R THAN ENTITY.
4 9 POS	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIDNAL FEE		RATE	ADOI- TIONAL FEE
TOWN TOWN	19	Minus	~ 20	• /	x. <u>25</u> .		OR	.,50.	
Endopended U GUI, I FO II)	1	Minus	·· 3	-/	x : 100.	·	OR	x s 200	
FRST PRESENTATION OF MALTIPLE DEPENDENT CLANS (37 CFR 1.14(1))					+. 180.		OR	30	
• .					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
# In/05	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADOI- TIONAL FEE
WENT WAS TO WENT THE PARTY OF T	. 2	Minus	"AD	•, •	×.25.	•	OR	5D.	30
Z triesenderi		Minus	3	مسر	× 100.	·	OR	x s 2000.	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 OFR 1.16(41)					+,180.		OR	.36Q	-
					TOTAL ADOL FEE		OR	TOTAL ADD'L FEE	30
(Column 1) (Cotumn 2) (Cotumn 3)									
皇41906	CLAIMS ' REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total	31	Minus	21	•	x, 25.		OR	x, <u>50</u> .	
A Independent DI COR LINEAU	1	Minus	-3	•	x s 100.		OR	,, <u>20</u> Q	1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.16(4))					-,180.		OR	. 360.	
					ADO'L FEE	1	OR	ADDL FEE	
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" (IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" (IN THIS SPACE is less than 3, enter "3". 									

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Atexandria, VA 22313-1450.